

## PART B - FEE(S) TRANSMITTAL

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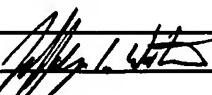
6980            7590            08/23/2006  
**TROUTMAN SANDERS LLP**  
600 PEACHTREE STREET , NE  
ATLANTA, GA 30308  
10/04/2006 CCHAU2 00000012 10749464

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|   |                    |
|---|--------------------|
| Jeffrey L. Waters   | (Depositor's name) |
|  |                    |
| September 28, 2006  |                    |
| (Date)  |                    |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/749,464      | 12/31/2003  | Derek A. Thompson    | INTEL4              | 3974             |

TITLE OF INVENTION: LOGICAL TO PHYSICAL ADDRESS MAPPING OF CHIP SELECTS

| APPLN. TYPE     | SMALL ENTITY | ISSUE FEE DUE  | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|-----------------|--------------|----------------|---------------------|----------------------|------------------|------------|
| nonprovisional  | NO           | \$1400         | \$0                 | \$0                  | \$1400           | 11/24/2006 |
| EXAMINER        | ART UNIT     | CLASS-SUBCLASS |                     |                      |                  |            |
| THOMAS, SHANE M |              | 2186           | 711-203000          |                      |                  |            |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Troutman Sanders LLP  
2 Jeffrey L. Waters  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Intel Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Clara, CA

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

- Issue Fcc  
 Publication Fee (No small entity discount permitted)  
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5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Jeffrey L. Waters

Date 9/28/2006

Typed or printed name Jeffrey L. Waters

Registration No. 53,749

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |   |                        |                    |
|--|---|------------------------|--------------------|
| Total Number of Pages in This Submission | 2 | Application Number     | 10/749,464         |
|  |   | Filing Date            | December 31, 2003  |
|  |   | First Named Inventor   | Thompson, Derek A. |
|  |   | Art Unit               | 2186               |
|  |   | Examiner Name          | S.M. Thomas        |
|  |   | Attorney Docket Number | INTEL4             |

## ENCLOSURES (check all that apply)

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form (PTOL85)            | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance  |
| <input checked="" type="checkbox"/> Fee Attached                             | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Communication to TC  |
| <input type="checkbox"/> Amendment/Reply                                     | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Terminal Disclaimer  | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund   | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> CD, Number of CD(s) _____                                      | Return Postcard; check for \$1400.00  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> Landscape Table on CD  |   |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    |   |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

## Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                       |          |        |
|--------------|-----------------------|----------|--------|
| Firm Name    | Troutman Sanders, LLP |          |        |
| Signature    |                       |          |        |
| Printed Name | Jeffrey L. Waters     |          |        |
| Date         | September 28, 2006    | Reg. No. | 53,749 |

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

|                       |                   |      |                    |
|-----------------------|-------------------|------|--------------------|
| Signature             |                   |      |                    |
| Typed or printed name | Jeffrey L. Waters | Date | September 28, 2006 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 1.11 and 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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